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Collated perfect

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CASE

OF

A FŒTUS

FOUND IN THE

ABDOMEN OF A YOUNG MAN,

AT

SHERBORNE, in DORSETSHIRE,

BY NATHANIEL HIGHMORE, SURGEON,

AND

MEMBER OF THE ROYAL COLLEGE OF SURGEONS IN LONDON.

WITH EXPLANATORY ENGRAVINGS.

Printed for the Author.

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(1815.)

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OF THE

ROYAL COLLEGE OF SURGEONS,

(IN WHOSE MUSEUM THE PREPARATION IS DEPOSITED,)

THE FOLLOWING DESCRIPTION

OF THIS

EXTRAORDINARY CASE,

IS RESPECTFULLY INSCRIBED,

BY THEIR FAITHFUL

AND OBEDIENT SERVANT,

THE AUTHOR.

SHERBORNE,
July, 1815.

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INTRODUCTORY ADDRESS.

THE following pages are submitted to the public with the utmost deference; and it is hoped that due allowance will be made for the production of an individual, wholly unaccustomed to the business of writing; and who involuntarily, as it were, comes forward in the character of an Author, mistrustful of his power to do justice to the part which has been assigned him.

In the arrangement here adopted, the several circumstances of the case are introduced as they respectively occurred; and it has been the author's care to abstain, as much as possible, from technical phraseology, so as to render the work acceptable to the general reader: to this end the narrative has been separated from the anatomical description, &c. But, in detailing the circumstances of this extraordinary Case, at once interesting to the naturalist and the philosopher, nothing has been omitted that could tend to cast a ray of light on any point connected with the subject; hence the mother's statements are faithfully reported, and the minutest occurrence has not been overlooked.

To the medical reader it may appear that too much precision has been observed in some of the statements; but, as this work is intended for general perusal, it is presumed that the necessity for such prolixity will be sufficiently apparent.

Several circumstances connected with this case, differing, so materially, from the other two cases of alike extraordinary nature, already before the

the public, added much to its importance in the estimation of the author's medical friends in London, by whom the Fœtus was examined; and after it had been inspected by His Royal Highness the Prince Regent, to whom the author had the honour of submitting it, (and who was graciously pleased to command his name to be added as a subscriber to the work,) he deposited it in the Museum of the Royal College of Surgeons, with permission to publish a statement of the case, under the immediate sanction of the college.

This publication having been protracted by a concurrence of circumstances, some of them inseparable from the duties of the medical profession, and others of a domestic nature, the author trusts the mention of these facts will excuse him, in the minds of his subscribers, for the time that has intervened, between his first announcing his intention of publishing, and the appearance of the work itself. Further apology he deems it unnecessary to offer, in submitting to the public the present little tract, feeling actuated solely by the desire of promoting a spirit of inquiry into circumstances but imperfectly known, and of thereby contributing to the advancement of truth.

CASE OF A FŒTUS, &c.

ON Monday, May 9th, 1814, I was requested by Sarah Lane, a poor woman of Sherborne, to visit her son, Thomas Lane, a lad between fifteen and sixteen years of age, who, she informed me, was confined to his bed, dangerously ill, adding, that his body was so much swollen she feared it would burst, unless relief could be speedily afforded him.

I immediately went with her, and found him lying in a most pitiable state, his countenance evidently denoting severe bodily pain: and, upon my asking her how long her son had been ailing, she stated to me, that he had not been well since the month of January preceding, when he had taken, as she thought, a violent chill, occasioned by his being extremely wet and cold from the snow, and not having an opportunity of putting on dry clothes 'till his return home, which was late in the evening. She further observed, that during this illness his bowels were much relaxed, which had considerably weakened him; that his strength had been gradually declining, and his pains at intervals increasing, so as to render him incapable of being removed from his bed, and reducing him to the state in which I then saw him. I enquired of the young man where his pain principally lay; he replied, in his body, which he said was much swollen and extremely painful.

ON my removing the bed-clothes, his appearance was decidedly that of a person labouring under ascites; and, on examining the abdomen, the existence of a fluid was obvious to the touch, its fluctuation being very perceptible. In the left side, however, immediately over the situation of the spleen

spleen was a projection visible to the eye, beyond the ordinary bounds of the abdominal parieties, and, on my feeling the part, he instantly complained of increased pain. I was forcibly struck with the violence of its pulsation, so much so, that, if it had been differently situated, I should have considered it an *aneurism* of considerable magnitude.

Independently, however, of the pulsatory feel, there was a different kind of motion perceptible, as if the part were affected by spasmodic action: a circumstance for which I could not satisfactorily account; and which appeared to me still more inexplicable, from the following statement of the lad's mother. She observed, that a few days previous to that time, he exclaimed, affrighted, "*Mother! do come to me, I have something* ALIVE *in my body!*" Upon saying which, he almost immediately fainted. She went to him, and found a very considerable motion in the swelling, which was not merely apparent to the touch, but equally visible to the eye; and resembling, as she would have expressed herself, the motion of a child during gestation. This, according to the mother's account, was the *first* time he had ever complained of, or felt, any *motion* in the part; as will presently appear by the statement she subsequently gave me, respecting his general state of health, from the time of his birth to that of my seeing him.

Finding that this projection was occasioned by some internal morbid enlargement, I was anxious to ascertain, with the least possible inconvenience to the patient, from whence it originated: and from the situation, its hardness, and somewhat irregular surface, I could not imagine it to be in any other part than the spleen.

His inferior extremities, particularly the left, were affected with anasarca, and were very œdematous. His visage was extremely pallid; his pulse feeble, irregular, and beating 120 in a minute; the diarrhœa had ceased for some few days, and his alvine evacuations were now regular; but the urinary secretion was of a pale colour, and inconsiderable in quantity.

Before

Before I left the house, and upon his mother's strongly urging the question, as to the probable result of her son's illness, I said, not wishing to deceive her, that he was certainly in imminent danger; and that, from his extreme emaciation, added to the violence of his symptoms, I feared nothing could prevent its very soon terminating fatally: however, I would endeavour to render him every assistance in my power, and hoped at least to be able to mitigate his sufferings. I also observed to her, that as he laboured under symptoms of such a peculiar nature, I could wish to be allowed, in the event of his death, to examine his body: and to this request she made no objection.

With this view of his case, I prescribed for him a dose of cathartic pills, containing, with other ingredients, *five grains* of *Hydrargyri Submurias;* and after they had produced two or three copious evacuations, I sent him diuretic powders, compounded of *Potassæ Nitras* and *Pulvis Scillæ*, with the addition of a small portion of *Pulvis Opii*, to allay the severity of his pains. He continued under this mode of treatment until the following Monday, 16th May, when I repeated the cathartic pills; after which he resumed the diuretic powders, continuing them 'till Friday, May 20th.

The Medicines thus prescribed had produced, during this short period, more apparent benefit than I could possibly have anticipated: his pulse was reduced to 108, the urinary secretion was much more copious, and there was an evident diminution in the circumference of the abdomen. I then had recourse to *mercurial frictions* over the tumour, from the recommendation of Dr. Woodforde, to whom I had previously mentioned this singular case, and whose opinion concurred with my own, in considering it a case of diseased spleen: but the stimulus of the ointment proved, at first, too irritating to be regularly used; however, from its occasional repetition, he became less susceptible of its influence, when it was persevered in. On Saturday, May 21st, recourse was again had to the cathartic pills; and, as his pains had returned more violently, I gave him *five grains of the Pil. Saponis cum Opio* in the evening.

The

The next morning, he expressed his having felt considerable relief from the pill which he had taken on the preceding evening, and wished me to repeat it; which accordingly I did. From this period, until the time of his death, he took no other kind of medicine than the anodyne pill at night, which always procured him considerable ease, and a cathartic pill, whenever a slight costiveness from the use of the opiate required it.

I was unavoidably prevented from seeing him for two days, until Thursday, June 9th, his mother having previously called upon me, to say that he was much worse than when I last saw him. She also stated, that he had "vomited a considerable quantity of thin and clotted blood;" that he was "exceedingly faint," and could scarcely breathe, seemingly from excessive pain. I desired her to preserve whatever might pass from him until I could see him again in the evening.

I indeed found him in a state of great suffering, which he principally referred to his back; his body was covered with a profuse perspiration, and his pulse was greatly accelerated; while at the same time he was voiding, per anum, long portions of firmly coagulated blood, one piece of which, that was partly drawn from him, would have measured more than two feet in length: it was elastic, and, when expelled, bore the perfect impression of the intestinal convolutions.* He was at this time perfectly sensible, and intreated me to send him another pill, (meaning the opiate pill) which I promised him I would do. I then intimated to his friends, that he was sinking so rapidly as scarcely to leave a chance of his surviving the night: at all events, I directed them carefully to mark every symptom distinctly, and to report them to me early on the following morning.

As I had anticipated, so it proved, for early the next day his mother brought me intelligence of his death. She observed, that her daughter had no sooner returned with the pill than he enquired for it, and

* In the course of this day he evacuated, from the stomach and anus, above a gallon of fluid and coagulated blood.

and swallowed it with great eagerness, under the hope, it would seem, of its affording him that relief which he had before experienced.

Shortly after taking the pill he became more composed, and slept for a few minutes; he then awoke in great agitation, and slept again, for the space of ten minutes more; but, again waking, he complained of more than ordinary pain, and, desiring his mother would hold his back, he in a few minutes expired, apparently in the greatest agony.

Having repeated my former request, that she would allow me to examine the body and investigate the nature of his complaint, she, as before, assented: I therefore, in the afternoon, proceeded to her house, accompanied by my medical friend Mr. Gray, and obtained the following result:—

EXAMINATION OF THE BODY.

On dividing the parietes of the abdomen and exposing its viscera, a large tumour, of an irregular but somewhat oval form, presented itself. It occupied portions of the epigastric, umbilical and left hypochondriac regions; and was uncovered by the omentum, which was found in a ruffled state, lying above the tumour.

In tracing the course of the intestines upwards, and examining more particularly the tumour, I discovered that the jejunum was continued into the anterior and sinister-lateral-inferior part of the sac, inclosing the substance, of which, by its apparent expansion, it evidently formed a part. I then traced the course of the duodenum from the pyloric orifice of the

stomach, and observed that its whole curve was firmly attached to and connected with the sac, and that this intestine, also terminating in it, formed the anterior and dexter-lateral portion.

The spleen, which had previously been suspected to be the viscus diseased, was lying behind the tumour; appeared compressed by it, and was inflamed at its lower edge.—The liver was perfectly sound and healthy; as were also the kidnies, ureters and urinary bladder. There was no bile in the gall-bladder, nor scarcely any fæces in the intestines, the latter containing little more than a quantity of coagulated blood, with two or three slight appearances of inflammation, in the course of the jejunum and ileum.

The young man, during the earlier part of my attendance on him, having laboured under frequent intermissions of the pulse, I examined also the state of the thoracic viscera. I found the pulmonary organs, though not actually diseased, were of a bad colour, but perfectly capable of performing their functions. The peri-cardium was considerably distended, and contained about seven ounces of serous fluid; the heart was of the usual size, and quite free from disease. It was now too late in the evening to examine the tumour, with the minuteness I had intended; I determined, therefore, with the mother's consent, to remove it entire to my own house, there to inspect it, in conjunction with Mr. Gray, on the following morning.

As this tumour appeared to be the only diseased part, and was evidently contained within the intestine, with a free communication between it, the duodenum, and the jejunum, I proceeded to remove it from the body; and, in order to prevent any alimentary, or other matter, from escaping, I secured the jejunum, below the tumour, with two ligatures, and divided it between them; but, as the stomach was so closely connected with the tumour above, I considered that one ligature would there be sufficient, which I applied round the pyloric orifice, and divided the neck of the stomach. The only attachments that now remained were, to the mesentery, which had confined it close to the spine, and to the pancreas. I

divided

divided the mesentery; but as the pancreas so strongly adhered to it, immediately over the vertebræ, a portion of it was removed with the tumour.

Having sewed up the body, I conveyed the tumour to my house, and found its weight to be four pounds and half: and, whilst in the act of placing it in a vessel, where it was to remain during the night, my fore-finger accidentally slipped round the curve of the arm, at the elbow-joint, which first gave me the idea of its partaking of an animal form. At this circumstance I felt greatly astonished; and the more so, when, on my endeavouring to trace, through the sac, the extremity of the limb, I could count five digitals!

I instantly dispatched Mr. Eastment (who was also present, during the whole examination,) for Mr. Gray—these Gentlemen returned, in a few minutes; when, having placed the tumour on a table, I opened the sac, at the contents of which we were amazed!—We found that the substance assumed, in many respects, a completely human form; but, in others, it was cramped and mis-shapen; as will appear by a reference to the plates, and the accompanying description.

Finding the contents of the sac to be of such an extraordinary nature, I acquainted other medical gentleman of the town with the circumstance; informing them that I should proceed to a more minute examination of its parts, on the following morning. They attended, and all expressed equal astonishment on witnessing the fact.

The discovery thus made gave rise to a variety of conjectures, and speculative arguments; and in order to ascertain that the youth from whom the fœtus had been removed was really a male person, I accompanied these gentlemen to the mother of the deceased's house, where, they each respectively examined the body, and became fully satisfied that he was a perfectly formed male; a circumstance on which some doubts had been expressed.

The

The report of this phenomenon spread rapidly, in all directions; and some thousands of persons flocked to my house, wishing to be satisfied of its truth. Considering it a case of such singularity, I determined on taking the fœtus to London; where, having submitted it to the inspection of my medical friends, and to numerous other personages, who have honoured me with their names as subscribers to this work, I deposited it in the Museum of the Royal College of Surgeons.

DESCRIPTION

DESCRIPTION OF THE FŒTUS; AND OF THE SAC, OR CYST, IN WHICH IT WAS CONTAINED.

On opening the sac by an oblique incision, through the anterior and thinnest part, an imperfect human fœtus was discovered. It lay on its left side, with the right arm, which was perfect, bent down upon the right hip; the left, which was very imperfectly formed, was resting against the leg, the thigh of which was bent up towards the abdomen; and the leg was bent at an acute angle upon the thigh.

The fœtus was connected with the sac by a short, thick funis, which arose from it's abdomen, rather towards the left side, passed forwards between the left arm and leg, and entered the sac at the posterior and upper part. It had no head; but at the basis of a denuded first vertebra some slips of skin arose, which followed nearly the course of the funis, with some medullary substance, around which was entangled a considerable quantity of matted hair, part of which measured twelve inches in length. There was also adhering to this skin a thin piece of bone, appearing to be a portion of cranium. The spine was much curved. There were two superior extremities, the right of which was perfectly formed, but had been fractured just above the carpal bones: the upper end of the radius was also dislocated, and protruded through the integuments. The left upper extremity was less perfectly formed; it was short, ill-shaped, and had only three fingers, with very long nails. The scapula of this arm rested on the side, almost as low down as the hip.

There was only one inferior extremity: the thigh was bent forwards upon the body of the child, and the leg bent, sharp-angle, upon the thigh; the skin being common to each almost half their length, forming a kind of web, uniting the two together. The knee was dislocated; the skin over it had been absorbed, and the joint was exposed. The ankle was also dislocated, and turned inwards; the common integuments had been absorbed, and the bones were exposed and perishing. It had six imperfectly formed toes.

The left inferior extremity was wanting; but there was a considerable surface divested of skin, at the spot where it should have been. This surface was regular and smooth, without any projecting bone, excepting at the inferior part, where a portion of ischium protruded.

There was a quantity of sebaceous matter, between the extremities and the body of the fœtus: on the upper part of the thorax was a long fleshy excrescence, somewhat like the papilla of an elderly woman; and, the appearance of the genitals favoured the idea of the fœtus being a female.

The sac, which contained the fœtus, was made up of two distinct portions: the larger portion, which was thick, spongy and highly vascular, involved the greater part of the fœtus. A small portion of the buttocks, the bent carpus and the right arm, together with the foot and ankle, were covered by, and lying in contact with the inner surface of the intestine of the boy, which formed the second portion of the sac.

The opening into the intestine seems to have been partly into the duodenum, and partly into the jejunum. The duodenum entered the cyst, the posterior part having been ruptured, while the anterior was continued into the jejunum, and formed the small portion of the described cyst. The jejunum emerged out of the sac, with a somewhat similar orifice, and was not far removed from the orifice of the duodenum: so that it was only the anterior

anterior portion of the intestinal canal that was dilated; the muscular fibres of the intestine could be easily traced, and were lost in the thick and vascular portion.

On the outside of the sac, near the place where the funis entered, a great number of large vessels were observable: and on the inside of the sac, not far from the insertion of the funis, was a large arterial branch ruptured, from whence the hæmorrhage proceeded, which was the immediate cause of the lad's death.

EXPLANATION

EXPLANATION OF THE PLATES.

PLATE I. *Represents an anterior and somewhat oblique position of the Fœtus; with the Sac, in which it was contained, inverted.*

A.—The base of the sac, with the insertion of the funis. The cyst at that part condensed and thickened, but gradually becoming thinner 'till it terminated in the expanded intestine.

B B B.—The anterior portion of the intestine, expanded and reduced thinner than usual.

C.—The orifice of the duodenum, terminating in the sac.

D.—The jejunum, emerging from the sac.

E.—A portion of the jejunum, round the extremity of which the ligature was applied, before it was divided.

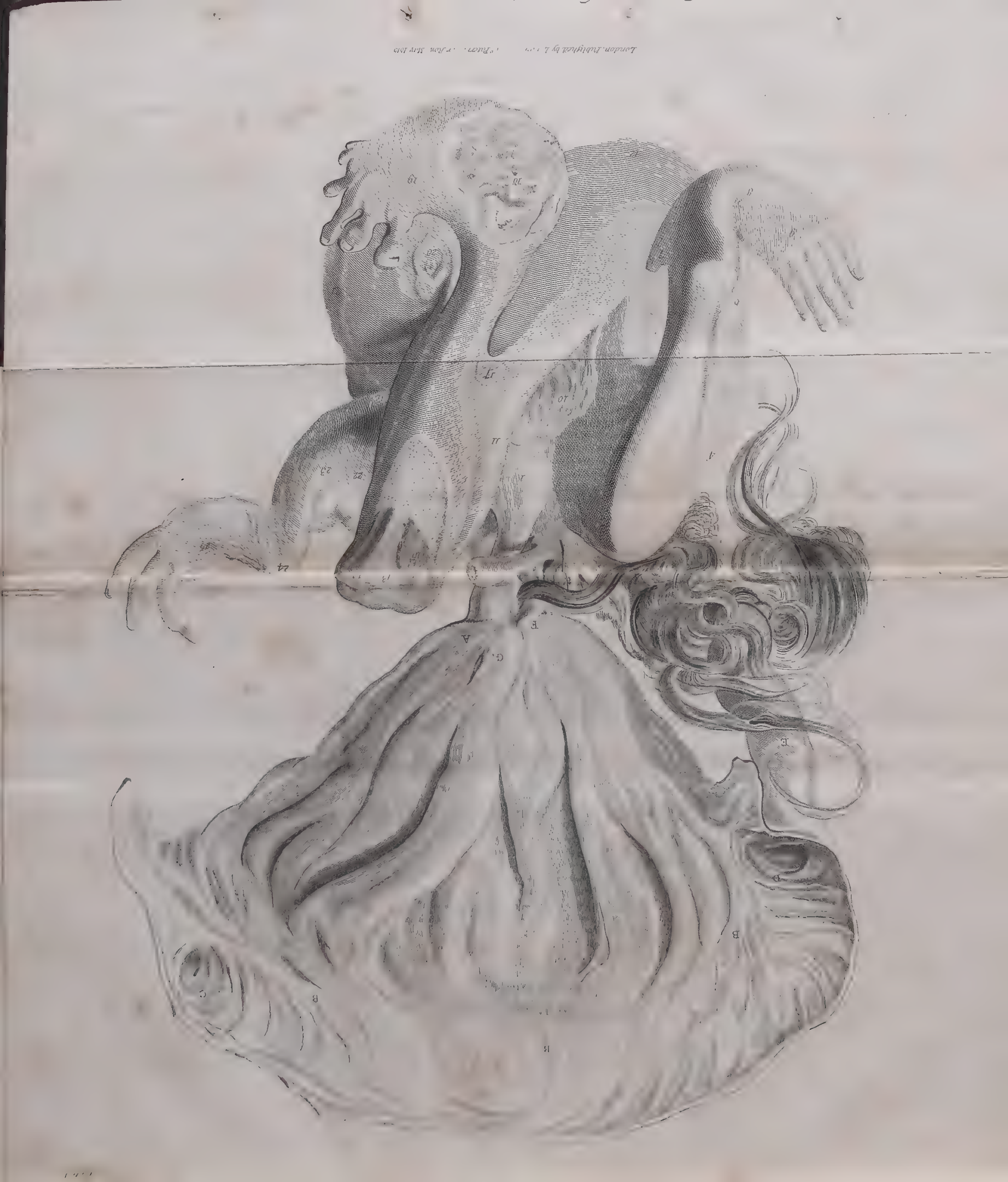
F.—The attachment, to the base of the cyst, of the integuments arising from the neck.

G.—A considerable branch of the mesenteric artery *ruptured*, from whence the hæmorrhage proceeded.

1.—The funis, $3\frac{1}{2}$ inches in length, arising from the abdomen of the fœtus, and inserted into the dense part of the cyst.

2.—A long fleshy excrescence, with an indentation on its top, but imperforate.

3.—Loose



3.—Loose portions of integuments arising from the neck, from the basis of which grew a considerable quantity of long, matted hair.
4.—The scapula, on the right side.
5.—The humerus.
6.—The ilium.
7.—The radius, dislocated, and the head of the bone protruding.
8.—The fore-arm, fractured and bent back on itself, with bony spiculæ appearing.
9.—The right-hand, distinctly formed, with a thumb, four fingers and nails.
10.—Sebaceous fatty substance, between the thigh and abdomen.
11.—The right thigh, $6\frac{1}{2}$ inches long.
12.—The ischium.
13.—The knee-joint, deprived of it's integuments by absorption.
14.—The head of the tibia, denuded.
15.—The head of the fibula.
16.—The leg, from the knee to the sole of the foot, $6\frac{1}{2}$ inches.
17.—A strong adhesion of the integuments, uniting the thigh and leg.
18.—Ulceration of the integuments, covering the tarsal bones and malleolus externus.
19.—The foot, with six imperfectly formed toes.
20.—The genitals.
21.—Ulceration of the soft-parts, in the situation of the left thigh.
22.—The left superior extremity, imperfectly formed.
23.—The fore-arm.
24.—The carpus.
25.—The meta-carpus, with three fingers and very long nails.

PLATE II. *Represents the posterior Parts of the Fœtus, with a more distinct and correct view of the Sac.*

A A.—The thin portions of the sac that were separated from each other with the knife, and which are represented, in this view, inclining to the situation in which they were united before the division was made.

B.—The pyloric orifice of the stomach.

C C.—The duodenum, taking its course, exteriorly, round the cyst, and terminating in it, at D.

E.—Slips of cellular membrane passing over the duodenum.

F.—The jejunum emerging from the cyst, with a portion of it pendant, constricted by the ligature that was applied round its extremity, at G.

H.—The insertion of the funis, into the dense part of the cyst.

1.—The upper cervical vertebra, with a small perforation near its centre.

2.—Thin piece of bone, apparently cranium, adhering to the integuments of the neck.

3.—The integuments of the neck, with a slight attachment to the sac, at 4.

5.—The funis.

6.—The hair, growing from the integuments at the posterior part of the neck.—* * Matted hair.

7 7.—The scapulæ.

8.—The right humerus.

9.—The fractured fore-arm.

10.—The palm of the right hand and inside of the fingers.

11.—The left, imperfect arm.

12 12.—The ilii.

13 13.—The ischii, denuded and partly absorbed.

14.—The

D
A
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B
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14.—The condyles of the os femoris, denuded.
15.—Under part of the right foot.
16.—The phalanges.
17.—The tarsal bones, denuded and also partly absorbed.

The fœtus being in so mutilated a state, in consequence of the length of time during which it was exposed for general inspection, its conveyance to London, and having been so much handled, it was found necessary, when deposited in the Museum of the Royal College of Surgeons, to defer all examination of its internal structure. But, in order to furnish my readers with all the information I could collect, concerning this singular case, I have subjoined a statement from Mrs. Lane, of the most particular circumstances connected with her son's general state of health, from the time of his birth, to that of my being called in to attend him.

Thomas Lane, the subject from whom the fœtus was removed, was born at Hilfield, in Dorsetshire, December 21st, 1798. He was wet-nursed, and appeared perfectly healthy until he attained the age of seven years, when he was seized with violent pains in his bowels; and his mother took him to the Lady of the late Admiral Digby, of Mintern-Magna.—This lady, whose benevolence to the poor has ever been uniformly conspicuous, attributing the child's illness to worms, administered vermifuge medicine. He voided no worms, yet grew better; but was not sufficiently recovered, so as to enable him to return to school, for nearly three months. During this illness his body became so much enlarged that, for several weeks, he could not button his clothes; but, as he grew better the swelling abated, and he became sufficiently reduced in size to admit of his clothes being buttoned, although, from that time, there always remained a visible enlargement.

In the succeeding year he enjoyed tolerably good health, in the day time; but, at night, he was often restless, occasionally somewhat delirious

rious, and whenever he complained of pain, it was uniformly referred to "his belly." He continued in a favorable state for the next six years, excepting a slight disposition to take cold, which always produced pain in the bowels, but generally subsided in a few days.

In March, 1811, he was seized with violent pain in the abdomen, accompanied with increased swelling, which rendered him unable to stand erect; but this also subsided in about a week. He then recovered, and became quite healthy; in short, his mother never knew him, at any period of his life, to appear so well, as after this illness. This healthy state continued only about twelve months, 'till April, 1812, when he was suddenly seized with considerable pain in his back and loins. He remained extremely ill for a few days, as before, and then resumed his employment as a carter's boy, although, apparently, in an unfit state.

Having been extremely wet and exposed to the snow, in January, 1814, he was seized with shiverings and general pains, especially in his legs, back and loins; he did not appear, as heretofore, so much enlarged in his body, but from this period he shewed evident symptoms of gradually declining. During the following month he was again taken worse, when, his mother informed me, she consulted Dr. Pew, of this town; and who, supposing him to have worms, prescribed for him some anthelmintic medicine, but he voided none.

In March, he was attacked with diarrhæa, which recurred every afternoon, attended with violent pain in the abdomen, and a strong disposition to fainting*: and, in this state he continued until within a few days of my attending him, the particulars of which have been already noticed.

Amongst

* At this time he was occasionally employed at Hilfield, and on his return home, he repeatedly told his mother that a quantity of "blood and fleshy matter" was continually evacuated with his motions; but nothing of the kind was ever seen by his mother, or myself, until the day on which he expired.

Amongst professional men, who have examined this singular fœtus, a variety of opinions and conjectures have been formed, some of which it may be well to notice. And first, with regard to its relation to the intestine a question arises, whether or not it was originally deposited there.

I am inclined to think that the weight of evidence is in favour of its not having been placed first in that part. The sac, as already mentioned, was formed of two distinct portions. The portion highest in the body was thick, highly vascular, and involved the greatest part of the fœtus: this portion was also attached to the child, by means of the funis, and was itself strongly adherent to the mesentery. The dilated intestine formed the most dependent part of the whole mass, and only covered a small portion of the posterior parts of the fœtus, the foot, fractured and bent carpus.

It would be difficult to imagine, contrary to the influence of gravity, that as the fœtus grew it should ascend; and should make the ascent from the loose, floating intestine, and in the direction of the funis from which it received its supply of blood, towards the higher, or fixed and immoveable part, the child's spine. Yet this must be the case upon the idea of the ovum, which formed the fœtus, having been deposited in the intestine. Again, the muscular fibres of the intestine not only formed the lowest part of the sac, but were to be traced into the superior, where they were lost; and about this part, a considerable contraction of the cavity of the sac was observable.

Various opinions have been entertained, as to the conception:—how did the rudiments of this fœtus get into the situation in which it was found? I shall not enumerate the different theories which fancy has suggested: but, to imagine it to have been the fruits of an unnatural crime; or an impregnated ovum, getting from the liquor amnii into the intestine, would require an assumption of so many material facts, not proved, that it seems unnecessary to enter into the discussion.

However, if we view it somewhat in the light of an extra-uterine fœtus, with the difference of a double conception; and that, by some accident, which it is not very difficult to imagine, the impregnated ova got connected together, the one forming an attachment to the uterus of the mother, and the other, (the fœtus in question,) to its twin brother; if, I say, this view of the subject be taken, there seems nothing in the matter which is wholly at variance with the known laws respecting generation.

It may be observed that this, and two other accounts, the one by G. Young, Esq. published in the Medico-Chirurgical Transactions; and the other by Mons. Dupuytren, in a Bulletin de l' Ecole de Medecine, de Paris, are the only well-authenticated cases on record, describing occurrences of this most extraordinary nature. It is, however, a circumstance much to be regretted, that the friends of persons dying from diseases, the character of which cannot be correctly ascertained, should so frequently feel reluctance to allow the necessary anatomical examinations, after the patients' decease. From the want of these only means of elucidating the real nature of such cases, the proper mode of treatment is but too frequently lost in obscurity, or left to the operation of mere conjecture.

FINIS.

ERRATA.

Page 8, line 24, after Newman, *for* F. *read* J. A.

—— Owen, Mr. Sherborne, *omitted.*

—— Pattison, Robert, Esq. Dorchester, *do.*

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